

APPLICATION DATA SHEET

Electronic Version v14

Stylesheet Version v14.0

Title of Invention	USE OF EDG2 RECEPTOR IN AN ANIMAL MODEL OF HEART FAILURE	
Application Type: regular, utility Attorney Docket Number: DEAV2002/0083 US NP		
Correspondence address: Customer Number: 005487 *005487*		
Continuing Data: This is a Non-Provisional of US application number 60/455,231, filed 2003-03-17 , now Pending.		
Priority Data: Doc.No: 02025161.7; Country - EP; Date: 2002-11-11 us-priority-claimed		
Inventors Information: <u>Inventor 1:</u> Applicant Authority Type: Inventor Citizenship: DE Name prefix: Dr. Given Name: Evi Family Name: KOSTENIS City of Residence: Grebenau Country of Residence: DE Address-1 of Mailing Address: Langwiesenweg 29 Address-2 of Mailing Address: City of Mailing Address: Grebenau State of Mailing Address: Postal Code of Mailing Address: 36323 Country of Mailing Address: DE		

Phone:

Fax:

E-mail:

Inventor 2:

Applicant Authority Type: Inventor

Citizenship: DE

Name prefix: Dr.

Given Name: Paulus

Family Name: WOHLFART

City of Residence: Bensheim

Country of Residence: DE

Address-1 of Mailing Address: Bertolt-Brecht-Ring 16C

Address-2 of Mailing Address:

City of Mailing Address: Bensheim

State of Mailing Address:

Postal Code of Mailing Address: 64625

Country of Mailing Address: DE

Phone:

Fax:

E-mail:

Inventor 3:

Applicant Authority Type: Inventor

Citizenship: DE

Name prefix: Dr.

Given Name: Jochen

Family Name: HUBER

City of Residence: Maxdorf

Country of Residence: DE

Address-1 of Mailing Address: Speyerestrasse 3

Address-2 of Mailing Address:

City of Mailing Address: Maxdorf

State of Mailing Address:

Postal Code of Mailing Address: 67133

Country of Mailing Address: DE

Phone:

Fax:

E-mail:

Inventor 4:

Applicant Authority Type: Inventor

Citizenship: DE

Name prefix: Dr.

Given Name: Kai

Family Name: ROSPORT

City of Residence: Munchen

Country of Residence: DE

Address-1 of Mailing Address: Gotzinger Strasse 44

Address-2 of Mailing Address:

City of Mailing Address: Munchen

State of Mailing Address:

Postal Code of Mailing Address: 81371

Country of Mailing Address: DE

Phone:

Fax:

E-mail:

Inventor 5:

Applicant Authority Type: Inventor

Citizenship: DE

Name prefix: Dr.

Given Name: Andreas

Family Name: BUELTMANN

City of Residence: Munchen

Country of Residence: DE

Address-1 of Mailing Address: Claude-Lorrain-Strasse 35

Address-2 of Mailing Address:

City of Mailing Address: Munchen

State of Mailing Address:

Postal Code of Mailing Address: 81543

Country of Mailing Address: DE

Phone:

Fax:

E-mail:

Inventor 6:

Applicant Authority Type: Inventor

Citizenship: DE

Name prefix: Dr.

Given Name: Christine

Family Name: BAUMGARTNER

City of Residence: Munchen

Country of Residence: DE

Address-1 of Mailing Address: Bavariastrasse 18C

Address-2 of Mailing Address:

City of Mailing Address: Munchen

State of Mailing Address:

Postal Code of Mailing Address: 80336

Country of Mailing Address: DE

Phone:

Fax:

E-mail:

Inventor 7:

Applicant Authority Type: Inventor

Citizenship: DE

Name prefix: Dr.

Given Name: Gotz

Family Name: Muench

City of Residence: Munchen

Country of Residence: DE

Address-1 of Mailing Address: Schellingstrasse 23

Address-2 of Mailing Address:

City of Mailing Address: Munchen

State of Mailing Address:

Postal Code of Mailing Address: 80799

Country of Mailing Address: DE

Phone:

Fax:

E-mail:

Inventor 8:

Applicant Authority Type: Inventor

Citizenship: DE

Name prefix: Dr.

Given Name: Martin

Family Name: UNGERER

City of Residence: Munchen

Country of Residence: DE

Address-1 of Mailing Address: Georgenstrasse 57

Address-2 of Mailing Address:

City of Mailing Address: Munchen

State of Mailing Address:

Postal Code of Mailing Address: 80799

Country of Mailing Address: DE

Phone:

Fax:

E-mail:

Attorney Information:

practitioner(s) at Customer Number:

005487

005487

as our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Assignee 1:

Organization Name:	Aventis Pharma Deutschland GmbH
Address-1 of Mailing Address:	Bruningstrasse 50
Address-2 of Mailing Address:	
City of Mailing Address:	Frankfurt am Main
State of Mailing Address:	
Postal Code of Mailing Address:	65926
Country of Mailing Address:	DE
Phone:	908-231-3737
Fax:	908-231-2626
E-mail:	aaron.dubberley@aventis.com